

# VS Form 10-11 Equine Infectious Anemia Laboratory Test

*This form is used to record the official testing of equine infectious anemia (EIA). Forms without an adequate description of the equine or missing address information will not be processed.*

This document is intended to give guidance on how to complete VS Form 10-11. Recognize that these are not official directions and forms change over time. If you have any questions regarding how to complete this form, contact your VS Area Office. A properly completed form is critical to assure proper compliance.

1. **ACCESSION NUMBER:** Leave blank. Number is assigned by the testing laboratory.
2. **DATE BLOOD DRAWN:** Date the blood is drawn from the animal described on the form.
3. **REASON FOR TESTING:** Mark appropriate box. "FIRST TEST" is utilized every year to establish the animal's status for movement purposes.
4. **GEOGRAPHIC INFORMATION SYSTEM (GIS):** If applicable, enter longitude and latitude of animal's location. This is left blank most of the time.
5. **VETERINARY LICENSE OR ACCREDITATION NUMBER:** State license number or National Accreditation Number (NAN) of the veterinarian.
6. **TEST TYPE:** Mark appropriate test. Agar gel immunodiffusion (**AGID**) and enzyme-linked immunosorbent assay (**ELISA**) are both recognized by USDA as official tests; contact your laboratory on test availability. **For international exports**, check which test is required by the country of destination.
  - Agar gel immunodiffusion (**AGID**): Also known as the Coggins test, it is the most widely accepted procedure for diagnosis of EIA. It is the only procedure that has been statistically correlated with the presence of the EIA virus in blood.
  - Competitive enzyme-linked immunosorbent assay (**CELISA**) and Vira-CHEK™ **ELISA**: Fewer false negatives are seen with this test than with the AGID. Test results can be obtained within minutes, compared to the minimum 24 hours required for reporting AGID test results. Positive tests must be confirmed using the AGID test.
7. **NAME AND ADDRESS OF STABLE/MARKET:** Name, address, zip code, telephone number (including area code) and county of stable/market. If all information is not provided, the form will not be processed.
8. **NAME AND ADDRESS OF OWNER:** Enter name, address, zip code, telephone number (including area code) and county of owner. If all information is not provided, the form will not be processed.
9. **NAME AND ADDRESS OF VETERINARIAN:** Name, address, zip code, telephone number (including area code) and county of the veterinarian. If all information is not provided, the form will not be processed.
10. **SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN:** Signature of accredited veterinarian who obtained the blood from the horse described below.
11. **TYPE OR PRINT SIGNATURE NAME:** Type or print the name of the signature in box 10.
12. **SIGNATURE DATE:** Date the form was signed. This date would be the same as or after the date in box 2.
13. **SIGNATURE OF OWNER OR OWNER'S AGENT:** Signature of owner or owner's agent certifying that the proper horse was represented to the veterinarian drawing the blood sample.

## VS Form 10-11 Equine Infectious Anemia Laboratory Test (cont'd)

- 14. TYPE OR PRINT SIGNATURE NAME:** Type or print the name of the person signing in box 13.
- 15. SIGNATURE DATE:** Date box 13 was signed. This date would be the same as or after the date in box 2.
- 16. TUBE NUMBER:** Instructions may vary depending on the laboratory, but the tube is numbered so it can be referenced to the blood drawn from a specific animal. The tubes are numbered sequentially giving a different number to each tube in the herd tested.
- 17. OFFICIAL TAG NUMBER:** Provide official tag number here, if applicable.
- 18. TATTOO/BRAND:** Provide tattoo or brand, if present.
- 19. NAME OF HORSE:** Provide the complete name of the horse.
- 20. COLOR:** Provide the color of the horse.
- 21. BREED:** Use breed codes. See Breed Code Guide.
- 22. ELECTRONIC I.D. NO.:** Provide electronic identification number, if applicable.
- 23. AGE or DOB:** Age or date of birth of the animal being tested. If age is used, indicate the units in years (y), months (m), weeks (w), or days (d). For young animals, the age in months, weeks, and days are commonly used as the unit of measure. For older animals, the age in years would commonly be recorded. For example, a 10 year old horse would be listed as 10y, or a 4 week old horse could be listed as 1m or 4w.
- 24. SEX:** Indicate the sex of the animal (M – Male, F – Female, G – Gelding, or N – Neutered [spayed mare]).
- 25-30. NARRATIVE DESCRIPTION AND REMARKS:** Written description of markings of the horse that corresponds to illustrations drawn on the picture above. Indicate appropriate markings, whorls, brands, and scars. Some states may require submission of photographs instead of drawings. Be as complete and accurate as possible; the descriptions **MUST** match the horse exactly. Written description of markings should be printed legibly or typed.
- 31-35. FOR LABORATORY USE ONLY:** Remaining fields are for laboratory use only. Leave blank.

There is no continuation sheet for VS Form 10-11.

The VS Form 10-11 Equine Infectious Anemia Laboratory Test is available electronically through the Veterinary Services Process Streamlining (VSPS) system. Digital photos of the horse can be uploaded to the form. Registration for VSPS is required and information about VSPS is available at: <https://vsps.aphis.usda.gov/vsps/>.